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Bib Data Sheet

CONFIRMATION NO. 2820

SERIAL NUMBER 10/605,821	FILING DATE 10/29/2003 RULE	CLASS 707	GROUP ART UNIT 2168	ATTORNEY DOCKET NO. INL 0111 PUS
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APPLICANTS

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** CONTINUING DATA *****

None, *Artz*

** FOREIGN APPLICATIONS *****

None, *Artz*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 02/27/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged <i>Artz</i> Examiner's Signature	MI	6	25	3
<i>Artz</i> Initials				

ADDRESS

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TITLE

Seamless Affiliated Link System

FILING FEE RECEIVED 430	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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